

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Black PAC			FEC IDENTIFICATION NUMBER ▼ C C00609388		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee Break Something Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount 70000.00		
City Washington	State DC	Zip Code 20036-3040	Transaction ID : VTDG0AEWXF2 Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure Digital Advertising - Estimate		Category/ Type			
Name of Federal Candidate Cunningham, Cal, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC		
Calendar Year-To-Date Per Election for Office Sought		1260899.30	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Break Something Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount 40000.00		
City Washington	State DC	Zip Code 20036-3040	Transaction ID : VTDG0AEWXG0 Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure Digital Advertising - Estimate		Category/ Type			
Name of Federal Candidate Peters, Gary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought		881134.34	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			110000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date MM / DD / YYYY 10 / 20 / 2020	

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Full Name of Payee Break Something Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount 80000.00		
City Washington	State DC	Zip Code 20036-3040	Transaction ID : VTDG0AEWXX4		
Purpose of Expenditure Digital Advertising - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Trump, Donald, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Break Something Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2020		
Mailing Address 1701 Rhode Island Ave NW FI 5			Amount 105000.00		
City Washington	State DC	Zip Code 20036-3040	Transaction ID : VTDG0AEWXM2		
Purpose of Expenditure Digital Advertising - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Biden, Joseph, R., , Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	185000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Shropshire, Adrienne, R., ,

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Date

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Burrell Communications Group, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2020	
Mailing Address 233 N Michigan Ave Ste 2900		Amount 3330.00	
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AEWXH8 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Media Production - Estimate		Category/ Type	
Name of Federal Candidate Biden, Joseph, R., , Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Burrell Communications Group, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2020	
Mailing Address 233 N Michigan Ave Ste 2900		Amount 9660.00	
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AEWXJ6 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Media Production - Estimate		Category/ Type	
Name of Federal Candidate Cunningham, Cal, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	12990.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Full Name of Payee Hawkfish, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2020	
Mailing Address 909 3rd Ave FI 15		Amount 103406.72	
City New York	State NY	Zip Code 10022-4745	Transaction ID : VTDG0AEWYY4
Purpose of Expenditure Digital Advertising - Estimate		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Biden, Joseph, R., , Jr.		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		7490202.14	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Hawkfish, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 19 / 2020	
Mailing Address 909 3rd Ave FI 15		Amount 2591.93	
City New York	State NY	Zip Code 10022-4745	Transaction ID : VTDG0AEWZ09
Purpose of Expenditure Digital Advertising - Estimate		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Trump, Donald, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		7490202.14	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	105998.65
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	413988.65

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